

broaden participation in vital scientific and medical studies.

Section 204 would expand to December 31, 2003 the presumptive period for providing compensation to veterans with undiagnosed illnesses. This authority expires at the end of this year. And I would like to thank the gentleman from Florida (Mr. GIBBONS) and the gentleman from Indiana (Mr. BUYER) for their work with us on this issue.

Title 3 would provide greater administrative flexibility to the U.S. Court of Appeals for Veterans Claims so that registration fees paid to the court might be used in connection with practitioner disciplinary proceedings and in support of bench and bar and veterans' law educational activities. Title 3 also authorizes the collection of registration fees for other court-sponsored activities where appropriate.

Section 401 would give the VA the authority to make a payment of life insurance proceedings to an alternate beneficiary when the primary beneficiary cannot be located within 3 years. Currently, there is no time limitation for the first-named beneficiary of a national service life insurance or United States Government life insurance policy to file a claim. As a result, VA is required to hold the unclaimed funds indefinitely. Section 402 would extend the copayment requirement for a VA outpatient prescription medication to September 30, 2006 from September 30, 2002.

Section 403 would make the availability of funds from VA's Health Services Improvement Fund subject to the provisions of the appropriations acts.

Section 404 would extend the Native Americans Veteran Housing Loan Pilot program to 2005.

Section 405 would modify the loan assumption notice requirement.

Section 406 would eliminate the need for a claimant to send a copy of a notice of appeal to the Secretary. Removal of this notice requirement would not impair VA's ability to receive notice of the filing of an appeal and to respond to those who are properly filed with the court.

Finally, section 407 would establish a 2-year nationwide pilot program requiring the Secretary to expand the available hours of the VA's 1-800 toll-free information service and to assess the extent to which demands for such service exists. This pilot would provide information on veterans benefits and services administered by all Federal departments and agencies.

I would like to thank the gentleman from Louisiana (Mr. BAKER) and his staff for working with the subcommittee on this provision, along with the gentlewoman from California (Mrs. CAPPS) for her testimony that she submitted at the subcommittee's July 10 hearing.

Mr. Speaker, I also want to thank a real gentleman, the gentleman from Texas (Mr. REYES), the ranking member of the Subcommittee on Benefits,

for his support and counsel in my first few weeks as chairman of this subcommittee.

Lastly, we would not be considering this bill if it were not for the wisdom and foresight of the gentleman from New Jersey (Mr. SMITH), chairman of the full committee, and the ranking member, the gentleman from Illinois (Mr. EVANS). These two gentlemen have served together on the Committee on Veterans' Affairs for some 20 years, and I appreciate their leadership.

Mr. Speaker, H.R. 2540 is a strong bill; and I urge my colleagues support of it.

Mr. EVANS. Mr. Speaker, I yield 5 minutes to the gentleman from Texas (Mr. REYES).

Mr. REYES. Mr. Speaker, I thank the gentleman for yielding me this time.

As an original cosponsor and strong supporter of H.R. 2540, the Veterans Benefits Act of 2001, I am pleased that we are moving forward to assure a cost of living increase for our Nation's disabled veterans and their families, and the other benefits provided in this legislation as well. The sooner the benefits provided in this bill can be enacted into law, I believe the better.

I want to acknowledge the cooperation of our chairman and ranking member, the gentleman from New Jersey (Mr. SMITH) and the gentleman from Illinois (Mr. EVANS), as well as our new subcommittee chair, the gentleman from Idaho (Mr. SIMPSON), in moving this bill forward. I appreciate their commitment and leadership to the benefits accorded to our veterans.

I want to highlight the provisions addressing the needs of Gulf War veterans. A new report of the Institute of Medicine acknowledges that symptoms experienced by Gulf War veterans have a significant degree of overlap with symptoms of patients diagnosed with conditions such as fibromyalgia, chronic fatigue syndrome, and irritable bowel syndrome.

When legislation was originally passed to provide service-connected compensation benefits to our Nation's Gulf War veterans, it was the intent of Congress that those who were experiencing these symptoms, such as fatigue, joint pain, and others noted in the recent IOM report, would be compensated. Unfortunately, VA's General Counsel ruled that only veterans whose symptoms did not carry a diagnostic label would be compensated. Currently, VA's ability to receive compensation depends on the happenstance of whether or not the examining physician attributes a diagnostic label to the symptoms. This is unfair to our Nation's veterans and must be changed.

The Gulf War provisions of H.R. 2540 place the emphasis where it was originally intended by focusing on the symptoms experienced by Gulf War veterans rather than a particular label which may be attributed to them. The term chronic multi-symptom illness is intended to include veterans who experience more than one symptom lasting

at least 6 months. It is my understanding that thousands of Gulf War veterans have had claims denied because their symptoms were attributed to a diagnosis of chronic fatigue syndrome. Most of these war veterans would be eligible for benefits provided by this bill as of April 1, 2002.

I deeply regret that the large tax cut recently signed into law leaves no funds available to make this provision effective any sooner. I would prefer that this bill provide those benefits and be effective as of November 2, 1994, when the original law was passed.

□ 1245

Nonetheless, I recognize that under the financial constraints that we must now live with, there is no money to provide for an earlier effective date. Sick Gulf War veterans deserve the compensation provided by this bill.

Mr. Speaker, I would also like to state that I support the manager's amendment extending until December 31, 2003, the period in which Gulf War veterans may manifest symptoms qualifying for compensation as an undiagnosed illness. The measure before us moves us towards the goal of meeting the needs of our sick Gulf War veterans in a responsible manner.

Again, I want to thank the chairman, the ranking member and the chair of the Subcommittee on Benefits for their leadership and their vision to our Nation's veterans.

H.R. 2540 is a good bill and I urge all the Members to support it.

Mr. SMITH of New Jersey. Mr. Speaker, because of great interest and the number of speakers on H.R. 2540, I ask unanimous consent that we have an additional 10 minutes equally divided between the majority and minority.

The SPEAKER pro tempore (Mr. RYAN of Wisconsin). Is there objection to the request of the gentleman from New Jersey?

There was no objection.

Mr. SMITH of New Jersey. Mr. Speaker, I yield 3 minutes to the gentleman from Indiana (Mr. BUYER).

Mr. BUYER. Mr. Speaker, I rise in strong support of the Veterans Benefits Act of 2001. I also wish to extend my compliments to the chairman, the gentleman from New Jersey (Mr. SMITH) and the gentleman from Illinois (Mr. EVANS); also the gentleman from Idaho (Mr. SIMPSON) and the gentleman from Texas (Mr. REYES) and also recognition to my Gulf War comrade, the gentleman from Nevada (Mr. GIBBONS).

I am especially pleased with the compensation provision for Vietnam and Gulf War veterans. For too long the Vietnam veterans have been waiting for VA to recognize illnesses like diabetes melitus for compensation and pension benefits.

I also clearly recall as a freshman in this Chamber in the 103rd Congress, it having only been a few months since I returned from the Persian Gulf, having to fight for my colleagues just to receive their medical attention as a result of military service.